(e) if the answer to part (d) above be *in* the negative, what are the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AMD; FAMILY WELFARE (DR. C. SILVERA): (a) to (e) Blanche flour or Vicia Sativa imported from Australia was found to contain some toxins. The import of any toxic pu'ses including Vkia Sativa has already been banned by the Ministry of Commerce vide their notification No. 98 (N-28)/92/93 dated 18th lanuary, 1993. Besides. the Port Health Officers at various Ports in India get the imported food-grains chemically analysed before releasing them for human consumption in the country.

**अनुसंधान संस्थानों की उपलब्धियां**

2121. **मौलाना अबैदुल्ला खान आजमी :** क्या स्वास्थ्य और परिवार कल्याण मंत्री यह बताने की कृपा करेंगे कि :

(क) इस वर्ष और गत वर्ष में राष्ट्रीय संचारी रोग संस्थान, केन्द्रीय मनोविकार विज्ञान संस्थान, जवाहरलाल स्नातकोत्तर चिकित्सा शिक्षा और अनुसंधान संस्थान, अखिल भारतीय शारीरिक औषध और पुनर्वास संस्थान, राष्ट्रीय क्षय रोग संस्थान, केन्द्रीय कुष्ठ अध्यापन और अनुसंधान संस्थान की क्या क्या उपलब्धियां रही हैं ;

(ख) उपर्युक्त संस्थानों की भावी योजनाओं का ब्यौरा क्या है; और

(ग) गत कुछ वर्षों के दौरान पटेल इंस्टीट्यूट की क्या उपलब्धियां रही हैं ?

**स्वास्थ्य और परिवार कल्याण मंत्रालय राज्य मंत्री (डा० श्री. सिल्वेरा) :** (क) और (ख) ब्यौरा अनुपत्र में दिया गया है । **(देखिये परिशिष्ट 171 अनुपत्र संख्या 35)**

(ग) सूचना संलग्न विवरण में दी गई है।

**विवरण**

**पटेल चेस्ट संस्थान**

**पिछले कुछ वर्षों के दौरान महत्वपूर्ण अनुसंधान उपलब्धियां**

(1) ब्लास्टोमाइकोसिस जैसे फेंफड़े के रोगों, कृषक फेफड़ा रोग, प्रत्यूर्जता संबंधी एस्पर्जिलस जिनुसाइटिल, जो पहले भारत में अज्ञात थी, की पहचान तथा उनका सफल उपचार ।

(2) दमा के उदभावन के जैव-रसायनिक आधार पर स्पष्टीकरण ।

(3) स्वास्थ्य तथा रोग में श्वसनी तथा वर्तुल प्रणालियों के नियमन के तंत्रों का स्पष्टीकरण ।

(4) प्रत्यूर्जता संबंधी तथा संक्रमणीय फुफ्फुस रोगों के लिये प्रेरणार्थक कारकों का संशोधन ।

**Study tra Tobacco related iJ**

2122. SHRI V. HANUMANTHA RAO:

SHRI YERRA NARAYANA-SWAMY:

WiH the Minister of HEALTH AND FAMILY WELFARE be pleased to refer to tbe answer to Unstarred Question 3968 given in the Rajya Sabha on 25th August, 1993 and state:

(a) the scientific basis of the study done by ICMR relating to tobacco related diseases;

(b) whether the figures are mere estimates; and

(c) the full details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (DR. C. SILVERA); (a) to (c) The ICMR estimate has been derived from published information and by using standard methodology which is based on the available

date on prevalence of tobacco habit ia the country and the relative risk, of deaths due to tobacco-related diseases.

**Mobile dispensaries**

2123. SHRI GOVIND RAO ADIK: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state;

(a) whether there is any proposal under consideration of Government for starting or running mobile dispensaries| clinics particularly in the rural areas and far off places in hilly and tribal areas for giving medical facilities to people at their door-steps; and

(b) if so, details thereof and if not, the-reasons for the same and the steps Government propose to take for render-medical aid to these people?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (DR. C. SILVERA): (a) and (b) Under National Programme for Control of Blindness, Eye Care or services are provided through Central Mobile Units and District Mobile Units in the rural and far flung areas including hilly & tribal areas.

Special guidelines have been issued to the Slates Ikh 7.5 ner cent of new Sub-Centres in tribal areas; to give relaxation for setting up sub-Centres. Primary Health Centres in case of tribal hamlets which are 5 kms. away from the available health and family welfare delivery point. Differen-tial population norms are already ptes-ting up of Sub-centres. Pri-Health Centres and Community j i tribal and hilly areas,

**Enbamu'ing Medical Care in (he tribal areas of Andhra Pradesh**

2124. SHRI V. HANUMANTHA RAO: Will the Minister cf HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that there is a separate unit in hi< Ministry to take special care of the health need of trioal population all over the countiy;

Ib) if so; the details of the functioning of this unit;

(c) whether any efforts have been made to enhance the medical care in the tribal areas of Andhra Pradesh; and

(d) if so, the details of success of the objectives achieved in enhancing medical care in the tribal areas of Andhra Pradesh?

THE MINISTER OF STATE IN IHE MINISTRY OF HEALTH AND FAMILY WELFARE (DR. C, SILVERA):
(a) Yes, Sir.

(b) A Tribal Development Planning Cell has been created in this Ministry in 1981 to coordinate in the policy, planning and monitoring of the Health Care Schemes for welfare and development of Scheduled Tribes.

(c) Yes, Sir.

(d) In order to provide promotive, preventive, curative and rehabilitative health care services in the tribal areas in the State, a net work of 824 sub-centres, 116 Primary Health Centres and 17 Communis Health Centres have beep-established till 31-3-1993, on related population norm. Besides this, 25 Allopathic, 38 Avurvedic, IS Homoeopathic and 11 *Unani dispensaries are also fun-ctioning to cater to the health care needs in the tribal area of Andhra Pradesh. All National Health and Family Welfare Prof-rammes are being implemented in the tribal areas of Andhra Pradesh.

**बंध्यीकरण के मामले**

2125. श्री जनार्दन यादव : क्या स्वास्थ्य और परिवार कल्याण मंत्री यह बताने की कृपा करेंगे कि :

(क) देश भर में परिवार नियोजन केन्द्रों की संख्या कितनी है ;